



CONVERSION OF A LIMITED PARTNERSHIP TO A PARTNERSHIP AUTHORITY

(Instructions on back of application)

1. The name of the limited partnership is: _____
2. The date the certificate of limited partnership was filed with this office is: _____
3. The limited partnership hereby cancels its certificate of limited partnership for the following reason: _____

This partnership hereby elects to convert from a limited partnership and files a statement of partnership authority, pursuant to Idaho Code § 53-3-903.

4. The name of the partnership will now be: _____
5. The street address of its chief executive office is: _____
6. The street address of one (1) office in Idaho: _____
7. The name and mailing address of all partners: (attached sheets may be added)

<u>Name</u>	<u>Address</u>
_____	_____
_____	_____

OR the name and street address of the registered agent in Idaho

8. The names of the partners authorized to execute an instrument transferring real property held in the name of the partnership:

9. Signature of at least 2 partners:

1) _____
 Typed Name: _____
 2) _____
 Typed Name: _____

10. Signature of all general partners of LP:

1) _____
 Typed Name: _____
 2) _____
 Typed Name: _____

Secretary of State use only

INSTRUCTIONS

Optional: If the document is incorrect where can you be reached for questions? _____

Note: Complete and submit the application in duplicate.

1. Line 1 - Enter the name of the limited partnership as it reads on the record of the Secretary of State's Office.
2. Line 2 - Enter the date the certificate of limited partnership was filed with the Secretary of State's Office.
3. Line 3 - A statement that the limited partnership is being cancelled and for what reason..
4. Line 4 - Enter the name of the partnership authority. This name shall not include words of organization which imply that the partnership is another kind of legal entity and shall not be the same as or deceptively similar to the name of another legal entity filed with the Secretary of State's Office.
5. Line 5 - Enter the street address of its chief executive office (not a PO Box or a Personal Mail Box)
6. Line 6 - Enter the street address of an office in Idaho. (not a PO Box or a Personal Mail Box).
7. Line 7 - List the name and mailing address of all partners OR the name and street address of its registered agent. The registered agent is the person designated to receive service of process upon litigation. This person must be located in Idaho at a street address.
8. Line 8 - Enter only the names of the partners authorized to execute transferring of real property.
9. Line 9 - Requires the signature of at least 2 partners from the statement of partnership authority.
10. Line 10 - Requires the signature of all general partners from the limited partnership.
11. Enclose the appropriate fee:
 - a. If the application is typed, the fee is \$30.00.
 - b. If the application is not typed or a non standard form is used, the fee is \$50.00.
 - c. If expedited service is requested, add \$20.00 to the filing fee.
 - d. If the fees are to be paid from the filing party's pre-paid customer account, conspicuously indicate the customer account number in the cover letter or transmittal document.
12. Mail or deliver to:

Office of the Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080
13. If you have questions or need help, call the Secretary of State's office at (208) 334-2301.